

**MERCK**Merck & Co., Inc.
P.O. Box 2000
Rahway, NJ 07065

Patent Department

JAN 24 2007

Facsimile Cover Sheet

TODAY'S DATE: January 24, 2007**PLEASE DELIVER THE FOLLOWING MESSAGE TO:**Examiners Name: RESPONSE TO THE ACTION SENT BY R.J. BALLSExaminer's fax number: 571 273-8300Group number: 1625**THIS MESSAGE IS FROM:**Name: Curtis C. PanzerPhone No.: (732) 594-3199Mail Location: RY60-30Fax No.: (732) 594-4720

RE: Applicants: D. Dube, et al.
Case No.: MC073YCA
Serial No.: 10/764,229
Filed: January 23, 2004
Title: 4-OXO-1-(3-SUBSTITUTED PHENYL)-1,4-
DIHYDRO-1,8-NAPHTHYRIDINE-3-
CARBOXAMIDE PHOSPHODIESTERASE-4 INHIBITORS

NUMBER OF PAGES BEING TRANSMITTED (INCLUDING COVER): 26

IF YOU DO NOT RECEIVE ALL OF THE PAGES, PLEASE CALL (732) 594-0516

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted
to the Patent and Trademark Office on the date shown below

Kathleen Reynolds

Type or print name of person signing certification

Kathleen Reynolds

Signature

Date

1/24/07

PATENT
CASE NO. MC073YCA

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In re application of: D. DUBE, ET AL.

Serial No. 10/764,229

Filed January 23, 2004

Group Art Unit 1625

Examiner R. Balls

For: 4-OXO-1-(3-SUBSTITUTED PHENYL)-1,4-DIHYDRO-1,8-NAPHTHYRIDINE-3-CARBOXAMIDE PHOSPHODIESTERASE-4 INHIBITORS

RECEIVED
CENTRAL FAX CENTER

JAN 24 2007

Transmitted herewith is an amendment in the above-identified application.

- ☐ No additional fee is required.
☒ The fee has been calculated as shown below.

CLAIMS AS AMENDED

(1)	(2) Claims remaining after amendment	(3)	(4) Highest Number Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	* <u>15</u>	-	** <u>20</u> =	<u>0</u> X	\$50	= <u>0.00</u>
Independent Claims	* <u>7</u>	-	*** <u>5</u> =	<u>2</u> X	\$200	= <u>400.00</u>
Multiple Dependent Claims					\$360 ****	= <u> </u>
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						400.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

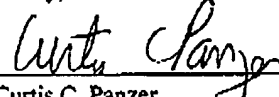
** If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

**** Add this fee only if application is amended to include multiple dependent claims (regardless of number) and no multiple dependent claims were originally filed.

Charge \$ 400.00 to Deposit Account No. 13-2755. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2755. A duplicate copy of this sheet is enclosed.

Respectfully,


By: Curtis C. Panzer

Attorney for Applicant(s)

Reg. No. 33,752

MERCK & CO., INC.
Patent Dept., RY60-30
P.O. Box 2000
Rahway, N.J. 07065-0907

(732) 594-3199

Date: January 24, 2007

IN DUPLICATE